



COMPLAINTS AND APPEAL FORM

This form should ONLY be used to lodge an official complaint about a matter which the student has found to be offensive, discriminatory or derogatory in any aspect of their student life at Opera City English College (OCEC).

Title: Mr/Ms/Miss/Mrs		Student Name:	
Student Number:		Phone:	
Course Title:		Email:	
Group:		Date:	

GRIEVANCE TYPE	
<input type="checkbox"/> Complaint	<input type="checkbox"/> Appeal
Reason for or Nature of Complaint or Appeal - Background	
Describe any other steps or efforts taken to resolve the issue prior to making the formal complaint. Also describe the outcome/s.	
Person/s Involved in or Related to this Complaint or Appeal	
<i>To fairly address the complaint or appeal and investigate, OCEC may need to speak to the person/s involved. Do you provide your consent to OCEC to discuss this complaint or appeal with them?</i>	
<input type="checkbox"/> Consent	<input type="checkbox"/> No Consent

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All the information I have provided in this form is true and accurate. I also understand that this complaint or appeal will be dealt with according to OCEC's relevant complaint handling policies and procedures.

Signature:	Date:
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OFFICE USE ONLY

Matter Referred to:	<input type="checkbox"/> PEO	<input type="checkbox"/> Director of Studies
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Comments of the Person Receiving the Form and Suggested Action:

Name:	Signature:	Date:
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Outcome:
